



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE

BETHESDA 14, MD.

NATIONAL INSTITUTES OF HEALTH

June 20, 1960

Dear Mr. Fogarty:

In accordance with your request, there is attached a series of statements relating to the current status of and future needs for positions in the 208(g) series for NIH, including both numbers and the salary ceiling.

Supplementing this material, it is relevant to note that NIH is faced with the loss of four senior staff people in the immediate future. Dr. Seymour Kety, Chief of the Laboratory of Clinical Sciences, National Institute of Mental Health, has been offered a full professorship at Johns Hopkins. Dr. Joel Elkes, Chief of the Clinical Neuropharmacology Research Center of the NIMH, has also been offered a full professorship. Finally, Dr. John Clausen, Chief of the Laboratory of Socio-Environmental Studies of the NIMH, is seriously considering a firm offer of a full professorship at Stanford University. While NIH expects turnover between the Bethesda staff and universities, the deteriorating, competitive position of the NIH is leading to situations such as that described above. The loss of these three people from one Institute over a short period of time will have a crippling effect.

Difficulties are not confined solely to bench scientists. As you know, Mr. John Fletcher is in the process of leaving us for a position in private industry. While an increase in the number of 208(g) positions, as proposed in the Senate appropriation bill, will be a great help in recruitment and retention of people at NIH, an increase in the salary ceiling for 208(g) positions to \$25,000 a year is becoming increasingly urgent.

Sincerely yours,

Charles V. Kidd

Charles V. Kidd
Chief

Office of Program Planning

Hon. John E. Fogarty
House of Representatives
Washington, D. C.

Attachments(4)

5-12-68

Utilization of 208 (g) Positions
National Institutes of Health

The initial legislation authorizing the establishment of professional and scientific positions at premium rates of pay (P.L. 692, 81st Congress, Section 406, August 15, 1950) was a recognition of the problem of difficulty in attracting and retaining specially qualified personnel in medical research fields. Beginning in 1951, first attention was given to supplementing the NIH staff with such personnel in the scientific research environment outside the NIH as could be induced to join. The scrutiny of personal qualifications was intense and the criteria set was quite rigid to insure that the optimum in quality was attained. With this prudent approach, the positions were used sparingly and filled slowly, but steadily. The initial emphasis was in recruiting from sources outside the Public Health Service so that in the first five years 15 of a total of 18 appointments were made from outside PHS. Since that time, in the interests of equity, in recognition of the outstanding caliber of scientific personnel on NIH staff and in order to retain talent which might otherwise be attracted to outside research activities, a greater percentage of selections from 208 (g) positions were made by promotion. Of the 73 208 (g) positions currently authorized for the NIH, 57 are filled as shown in the attached lists. The remaining 16 are under active recruitment, 6 being allotted to the Office of the Director, NIH, and 10 to the offices of the various Institute Directors. Specifically these represent for the Office of the Director the positions:

- 6 Associate Director for Training
- Associate Director for Institutional Relations
- Associate Director for Research Grants
- Chief, Office of International Research Activities
- Deputy Chief, Office of International Research Activities
- Deputy Chief, Office of Program Planning

Likewise these represent for the Institutes the following:

- 10 Associate Directors of Extramural Programs - 4
- Deputy Directors of Institutes - 3
- Chiefs of Institutes Collaborative Programs - 3

This allotment of the remaining authorized positions reflects the recent reorganization of the top structure of the NIH and the constituent Institutes. Serious study of the administrative functions of the NIH and its Institutes from the stand point of program development and execution, information analysis as an essential preliminary to sound decision making, and program surveillance, has demonstrated a need of additional top flight professional personnel. Since personnel within the Commissioned Corps is in too short supply to fill all of the key positions established by the reorganization, there must be, consequently, a sharp increase in the utilization of Civil Service personnel with broad scientific and administrative experience in these areas.

This utilization of the 16 positions described above will go far toward remedying existing deficiencies discovered in the past six months. Additional 208 (g) authority, however, is needed to support essential program and staff development as outlined below.

Sharp expansion of certain programs of collaborative research has led to systematic review of each program by the NIH staff supplemented by outside consultants. In each case formal recommendations were made to broaden professional competence on a high professional level so as to be certain these costly programs are prosecuted with efficiency. The satisfaction of these needs will require 15 208 (g) positions for the collaborative research programs as follows:

Cancer Chemotherapy - 4
Psychopharmacology - 3
Perinatal Studies (Neurology) - 6
Cancer Diagnostic Test Development - 2

15

With the increase of additional research facilities through the NIH building program it will be possible to provide essential program expansions which have heretofore been denied because of space limitations. Provision of sufficient professional planning and leadership will require an estimated 25 208 (g) positions in such areas as: Heart Surgery, Neurosurgery, Biologic Standards, Physical Biology and Dental Research. The specific allotment of these position authorities among the institutes will be dependent upon the success of the NIH in attracting professional leaders of the caliber required.

The NIH has recognized a vital requirement for the provision of Biometric and Epidemiological skills throughout its research programs. Provision of adequate programming and direction of Biometric and Epidemiological efforts will require five 208 (g) positions distributed among NIMH, NIAMD, NIDR, NINDB and NIAID.

In addition to the above requirements, all of which represent expanded program efforts, the NIH has additional needs for 208 (g) authority to provide for normal career development of exceptional individuals now employed at the NIH. This need will be particularly apparent during the coming two years. The age of the Institution is such that the expansion beginning some ten years ago has developed an able layer of advanced scientists of national and international stature. These scientists are today receiving an increasing number of offers of professorships and high posts in industry. While it is not NIH purpose to hold all individuals of high excellence that develop, we must be in a position to hold our fair share. One would expect that in this category there would be need for as many as 20 positions.

In summary then, of the 73 positions available to the NIH, 57 are currently filled and 16 are under active recruitment to strengthen the NIH program leadership.

Additional authority for 65 208 (g) positions is required as follows:

Collaborative programs - 15
Expanded Institute programs - 25
Biometrics & Epidemiology - 5
Career Development - 20 (Scientists growth - 1958-1960)

In recognition, however, that all the recruitment objectives may not be reached during the next 18 months and that moreover a limited number of positions can be filled by Commissioned Officers, it is estimated that an addition of 52 positions would probably satisfy the most urgent needs of the NIH during this period.